

# INSTRUCTIONS ON HOW TO DOWNLOAD THE CURRENT 1391-FORM

The Federal Aid Highway Construction Contractors Annual EEO Report, Federal Form PR-1391 (1391-Form), is located on the Department's Website at [www.dotd.la.gov](http://www.dotd.la.gov). Select – Business Working with DOTD → DBE → Contract Compliance Unit → FHWA 1391 Form:

Select: Business Working with DOTD (yellow arrow)



Select: DBE (yellow arrow)





Select: Contract Compliance Unit (yellow arrow)

Select: FHWA 1391-Form (yellow arrow)

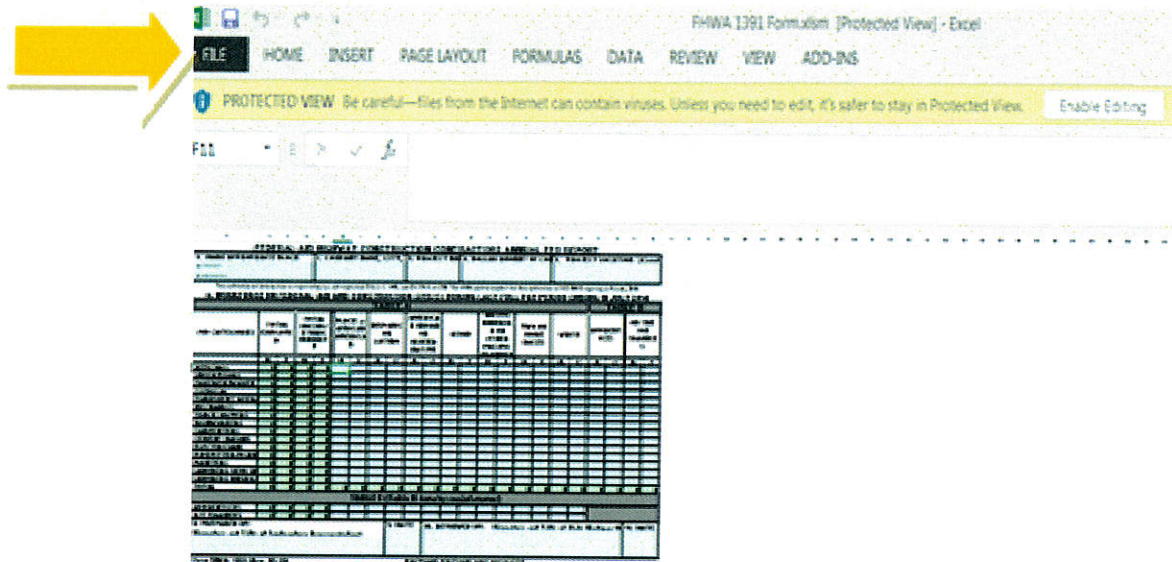
2



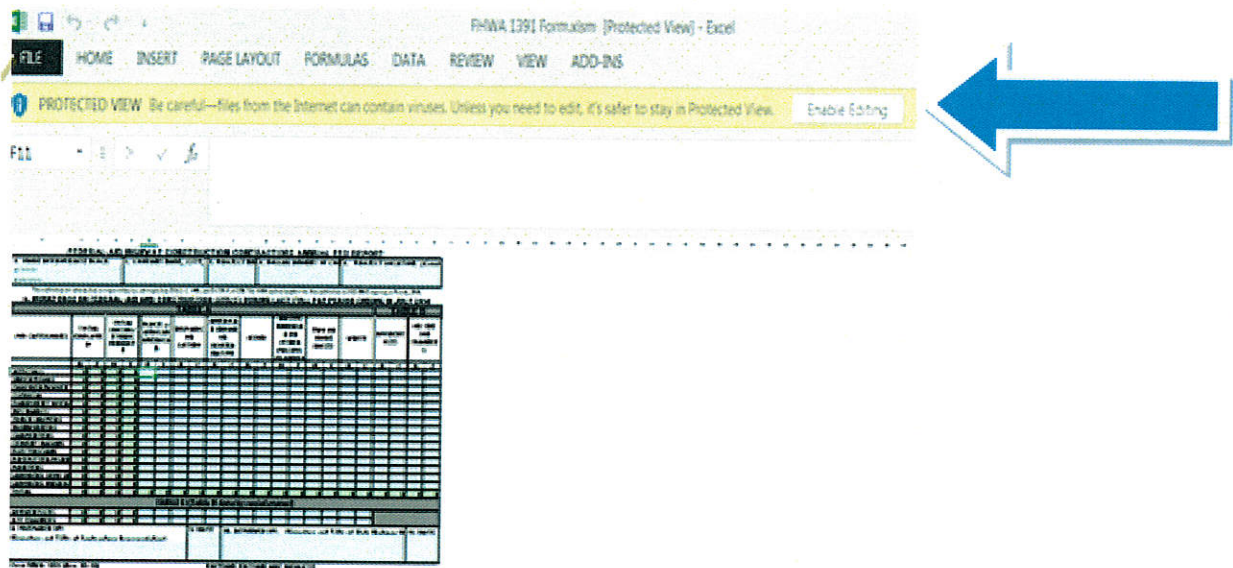
## INSTRUCTIONS ON HOW TO DOWNLOAD THE CURRENT 1391-FORM, CONT.

Note: The 1391-Form cannot be completed on the website; you must first select the Enable Editing button in the yellow highlighted area → select file in the top left corner → select save as → then save the file to your computer.

Select: File  
(yellow arrow)



Enable Editing  
(blue arrow)



Note: Only use the 1391-Form from the Department's Website annually. This version of the 1391-Form is the most current, and has been formatted for the current year.



# INSTRUCTIONS ON HOW TO DOWNLOAD THE CURRENT 1391-FORM, CONT.

## INSTRUCTIONS ON HOW TO COMPLETE THE 1391-FORM:

Once the 1391-Form has been downloaded and saved to your computer and you are ready to complete, follow the steps below for each numbered box located in the light blue area on the form.

Box 1 – Select Contractor or Subcontractor

Box 2 – Provide the company's name and address.

Box 3 – Enter the **State Project Number** only for the project.

Box 4 – Enter the total dollar value of the federal-aid contract or subcontract.

Box 5 – Enter Parish the project is located in. If the project is located in more than one Parish, put the first Parish listed on the contract.

FEDERAL-AID HIGHWAY CONSTRUCTION CONTRACTORS ANNUAL EEO REPORT																							
1. MARK APPROPRIATE BLOCK		2. COMPANY NAME, CITY,		3. PROJECT UNIT		4. DOLLAR AMOUNT OF CONTR.		5. PROJECT LOCATION: (County)															
<input type="checkbox"/> Contractor	<input type="checkbox"/> Subcontractor	1		2		3		4		5													
This collection of information is required by law and regulation 29 U.S.C. 941a and 29 CFR Part 230. The OMB control number for this collection is 2450-0043 expiring in March, 2016.																							
6. WORKFORCE ON FEDERAL-AID AND CONSTRUCTION SITE(S) DURING LAST FULL PAY PERIOD ENDING IN JULY 2014																							
TABLE A																TABLE B							
JOB CATEGORIES	TOTAL EMPLOYEES		TOTAL RACIAL/ETHNIC MINORITY		BLACK or AFRICAN AMERICAN		HISPANIC or LATINO		AMERICAN INDIAN or ALASKA NATIVE		ASIAN		NATIVE HAWAIIAN or OTHER PACIFIC ISLANDER		TWO OR MORE RACES		WHITE		APPRENTICES		ON THE JOB TRAINEES		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
OFFICIALS																							
SUPERVISORS																							
FOREMEN/POWERS																							
CLERICAL																							
EQUIPMENT OPER.																							
MECHANICS																							
TRUCK DRIVERS																							
IRONWORKERS																							
CARPENTERS																							
CEMENT MASONS																							
ELECTRICIANS																							
PIPEFITTER/PLUM																							
PAINTERS																							
LABORERS-SKILLED																							
LABORERS-UNSKILLED																							
TOTAL																							
TABLE C (Table B data by racial/ethnic)																							
APPRENTICES																							
ON THE JOB TRAINEES																							
8. PREPARED BY:										9. DATE		10. REVIEWED BY: (Signature and Title of State Highway)										11. DATE	
(Signature and Title of Contractor Representative)																							

Form FHWA-1391 (Rev. 03-13)

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Box 6 – The current reporting year will be provided for you.



## INSTRUCTIONS ON HOW TO DOWNLOAD THE CURRENT 1391-FORM, CONT.

### Box 7 – Employment Workforce:

**Table A:** Enter employment workforce for each job category, be sure to indicate female and minority employees by racial status. **Note:** Data can only be entered in the light blue fields. The data will automatically calculate in the light green areas of the form.

Example: 3 equipment operators and 1 carpenter. 2 equipment operators are male (1 American Indian and 1 Black or African American), 1 is female (Asian). Locate the row for equipment operators in box 7 of the form, in the light blue area enter 1 for male in the column under Black or African American, enter 1 for male in the column under American Indian, and enter 1 for female in the column under Asian. Locate the row for carpenters and in the light blue area enter 1 for male in the white column. Notice in the light green area of the form you will now see 3 for males and 1 for female under the Total Employed column. Under the Total Racial/Ethnic Minority column, you will now see 2 for males and 1 for female. The information entered automatically calculates in the light green areas of the form.

### **Table B:** Apprentices and On-the-Job (OJT) Trainees:

If Apprentices and/or OJT Trainees are reported, the only information entered here is the number of males and/or females in the row the training is being performed. Note: The information entered in this area will not be calculated in the light green area for Total Employed.

FEDERAL-AID HIGHWAY CONSTRUCTION CONTRACTORS ANNUAL EEO REPORT																											
1. MAKE APPROPRIATE BLOCK				2. COMPANY NAME, CITY,				3. PROJECT NAME				4. DOLLAR AMOUNT OF CONTR.				5. PROJECT LOCATION: (Cont.)											
a. Contractor				b. Subcontractor				c. Joint Venture				d. Other				e. Other											
This collection of information is required by law and regulation 28 U.S.C. 541a and 29 CFR Part 258. The OMB control number for this collection is 2525-0049 expiring in March, 2016.																											
6. WORKFORCE ON FEDERAL-AID AND CONSTRUCTION SITE(S) DURING LAST FULL PAY PERIOD ENDING IN JULY 2014																											
JOB CATEGORIES		TOTAL EMPLOYEES		TOTAL RACIAL/ETHNIC MINORITY		7A TABLE A										7B TABLE B											
						BLACK OR AFRICAN AMERICAN		HISPANIC OR LATINO		AMERICAN INDIAN OR ALASKA NATIVE		ASIAN		NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER		TWO OR MORE RACES		WHITE		APPRENTICES		ON THE JOB TRAINEES					
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
OFFICIALS																											
SUPERVISORS																											
FOREMAN/OWNER																											
CLERICAL																											
EQUIPMENT OPER.																											
MECHANICS																											
TRUCK DRIVERS																											
IRONWORKERS																											
CARPENTERS																											
CEMENT MASON																											
ELECTRICIANS																											
PIPEFITTER/PLUM																											
PAINTERS																											
LABORERS-SEMI SK																											
LABORERS-UNSKILL																											
TOTAL																											
TABLE C (Table B data by racial status)																											
APPRENTICES																											
OJT TRAINEES																											
8. PREPARED BY:														9. DATE				10. REVIEWED BY:									
(Signature and Title of Contractor Representative)														(Date)				(Signature and Title of State Witness or 11. DATE)									

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### Box 7 – Employment Workforce:



## INSTRUCTIONS ON HOW TO DOWNLOAD THE CURRENT 1391-FORM, CONT.

Table C: Enter the number of Apprentices and/or On the Job Trainees under the corresponding column for racial status for males and females.

Example: Under Table B, two males Latino OJT's were entered in the corresponding row for cement masons, under Table C, you would enter the number two under the corresponding column for their racial status. The information entered will automatically populate in the light green area of the form under Table 7C

FEDERAL-AID HIGHWAY CONSTRUCTION CONTRACTORS ANNUAL EEO REPORT																											
1. HAVE APPROPRIATE BLOCK				2. COMPANY NAME, CITY,				3. PROJECT NAME				4. BOLLAR NUMBER OF COMS.				5. PROJECT LOCATION: (County)											
<input type="checkbox"/> Contractor <input type="checkbox"/> Subcontractor																											
<small>This collection of information is required by law and regulation 23 U.S.C. 141a and 23 CFR Part 239. The OMB control number for this collection is 2425-0049 expiring in March, 2016.</small>																											
6. WORKFORCE ON FEDERAL-AID AND CONSTRUCTION SITE(S) DURING LAST FULL PAY PERIOD ENDING IN JULY 2014																											
TABLE A																				TABLE B							
JOB CATEGORIES	TOTAL EMPLOYEES		TOTAL RACIAL/ETHNIC MINORITY		BLACK or AFRICAN AMERICAN		HISPANIC or LATINO		AMERICAN INDIAN or ALASKA NATIVE		ASIAN		NATIVE HAWAIIAN or OTHER PACIFIC ISLANDER		TWO OR MORE RACES		WHITE		APPRENTICES		ON THE JOB TRAINEES						
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F					
OFFICIALS																											
SUPERVISORS																											
FOREMAN/OWNER																											
CERICAL																											
EQUIPMENT OPERA																											
MECHANICS																											
TRUCK DRIVERS																											
IRONWORKERS																											
CARPENTERS																											
CEMENT MASONS																											
ELECTRICIANS																											
PIPEFITTER/PLUMB																											
PAINTERS																											
LABORERS-SKILLED																											
LABORERS-UNSKILLED																											
TOTAL																											
<div style="display: flex; justify-content: space-between;"> <div>7C</div> <div>TABLE C (Table B data by racial status)</div> </div>																											
<div style="display: flex; justify-content: space-between;"> <div>APPRENTICES</div> <div></div> </div>																											
<div style="display: flex; justify-content: space-between;"> <div>OJT TRAINEES</div> <div></div> </div>																											
8. PREPARED BY:												9. DATE				10. REVIEWED BY: (Signature and Title of State Highway)								11. DATE			
(Signature and Title of Contractor Representative)												(Date)				(Signature and Title of State Highway)								(Date)			
8												9				10								11			

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Box 8 – Prepared by:

Type in the name of the person completing the 1391-Form. This is accepted electronically.

Box 9 – Date:

Enter the date the 1391-Form was completed.

Box 10 and Box 11 – Reviewed by and Date:

Leave Blank.

Once the 1391-Form is completed, save and name the file.

Example: XYZ Company Inc. H.000139. The completed 1391-Form is now saved in the Excel Format as down loaded from the Department's Website and ready to be submitted.

Submit the completed electronic form file (Excel Spreadsheet) **by August 16, 2019**, to:

[DOTDForm1391@la.gov](mailto:DOTDForm1391@la.gov)